

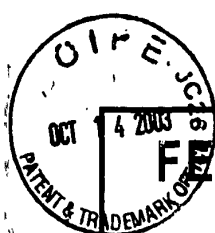


This Form Based on PTO/SB/21

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/986,313
	Filing Date	November 8, 2001
	First Named Inventor	TANIZAWA
	Group Art Unit	2858
	Examiner Name	DEB, ANJAN K.
	Attorney Docket Number	11-071

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request of Refund Remarks	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Brief with Appendix) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i>
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm name	Posz & Bethards, PLC	
Individual name	David G. Posz	
Registration No.	37,701	
Signature		
Date	October 14, 2003	

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Approved for use through 04/30/2003. OMB 0651-0032
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PTO/SB/17 (01-03)

AFI

2858

FEE TRANSMITTAL
for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☐ Applicant Claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** 714**Complete if Known**

Application Number	09/986,313
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Art Unit	2858
Attorney Docket No.	11-071

METHOD OF PAYMENT (check all that apply)☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None☐ Deposit AccountDeposit Account Number
Deposit Account Name

50-1147

POSZ & BETHARDS, PLC

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) during the pendency of this application☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code Fee (\$) Fee Code Fee (\$)

1051 130 2051 65

1052 50 2052 25

1053 130 1053 130

1812 2,520 1812 2,520

1804 920* 1804 920*

1805 1,840* 1805 1,840*

1251 110 2251 55

1252 420 2252 210

1253 950 2253 475

1254 1,480 2254 740

1255 2,010 2255 1005

1401 330 2401 165

1402 330 2402 165

1403 290 2403 145

1451 1,510 1451 1,510

1452 110 2452 55

1453 1,330 2453 665

1501 1,330 2501 665

1502 480 2502 240

1503 640 2503 320

1460 130 1460 130

1807 50 1807 50

1806 180 1806 180

8021 40 8021 40

1809 770 2809 385

1810 770 2810 385

1801 770 2801 385

1802 900 1802 900

Other fee (specify)

SUBTOTAL (3) (\$)

420

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
		1001	770	2001	385	Utility filing fee	
		1002	340	2002	170	Design filing fee	
		1003	530	2003	265	Plant filing fee	
		1004	770	2004	385	Reissue filing fee	
		1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
22	20**= 2	18	36
8	5**= 3	86	258

Multiple Dependent

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
		1202	18	2202	9	Claims in excess of 20
		1201	86	2201	43	Independent claims in excess of 3
		1203	290	2203	145	Multiple dependent claim, if not paid
		1204	86	2204	43	**Reissue independent claims over original patent
		1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

** or number previously paid, if greater; For Reissues, see above

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

420

SUBMITTED BY**Complete (if applicable)**

Name (Print/Type)	DAVID G. POSZ	Registration No. (Attorney/Agent)	37,701	Telephone	(703) 707-9110
Signature		Date	October 14, 2003		

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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